

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X060

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Owner's Act 2600 Person in C Billic	ent Address Air INC. Idress James 1 harge	1. 1.	mber and street, city, state, zip code) New Alban, IN 47157 My Louwille, KT 40245	Telephone Number 1.2 949 2.35 582 425 8.22 Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Date of Inspection (mm/dd/yr) CO/27/2019 Follow-up Release Date No // days Summary of Violations: C NC R	
Certified Fo	ood Manag	er v f	(3/13/23)		Menu Type (See back of page) 12345	
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"						
Section#	C/NC	R	Narrative	CONTRACTOR OF TAXABLE AND THE	ALL EXAMPL	To Be Corrected By
259				_		TO DE COITCE DY
231	ع لير		Observed walk-in freezer to be broke	The second secon		7 aday
			- staff discound fourer was broken - all fully cooked items must be within 7 days /all items has	contend or discorbed		
			- Maintenance was on sume fixing - NATHING CAN BE PUT BACK	issue IN FREEZER		
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Decision 41	/ (ma : - : - !	4141	adiate d'V	Tropported by Champ and the -	winted):	
Received by (name and title printed): A.). Inspected by (name and title printed): A.). Inspected by (name and title printed):						
Received by	(extinature); <u>)</u>	Mar	Inspected by (signature);		aj
cc:			cc;		cc:	1